
General Patient Care Protocols:

EMT-Basic Scope of Practice

I. Intent

1. This program document outlines the scope of practice of EMT personnel practicing in the District of Columbia. Any activity conducted outside this established scope of practice places the individual's certificate at risk for certification review.

II. Scope of Practice

1. During training, while at the scene of an emergency, and during transport of sick or injured, or during interfacility transfer, a supervised EMT trainee or certified EMT is authorized to do any of the following:
 - A. Evaluate the ill and injured.
 - B. Render basic life support, rescue and first aid to patients.
 - C. Obtain diagnostic signs including temperature, blood pressure, pulse and respiration rates, level of consciousness, and pupil status.
 - D. Perform cardiopulmonary resuscitation, including the use of mechanical adjuncts to basic cardiopulmonary resuscitation.
 - E. Use the following adjunctive airway breathing aids
 - i. Oropharyngeal airway
 - ii. Nasopharyngeal airway
 - iii. Combi-tube airway
 - iv. Suction devices
 - v. Basic oxygen delivery devices
 - vi. Manual and mechanical ventilating devices designed for prehospital use

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II. Scope of Practice (continued)

- F. Use various types of stretchers and body immobilization devices.
- G. Provide initial pre-hospital emergency care of trauma.
- H. Perform basic field triage.
- I. Perform blood glucose testing
- J. Initiate and monitor peripheral lines delivering intravenous normal saline solution without medication.
- K. Initiate and monitor saline locks
- L. Administer the following medications as outlined in the current protocols
 - i. Albuterol sulfate nebulizer
 - ii. Epinephrine 1:1,000 autoinjector
 - iii. Low-dose aspirin (81mg)
 - iv. Narcan IM
 - v. Assist with Nitroglycerin
 - vi. Oral glucose
 - vii. Oral charcoal
 - viii. Oxygen
- M. Assist an EMT-I and/or an EMT-P in the pretreatment set up for ALS procedures.
- N. Manage patients within their scope of practice.
- O. Transport patients.